

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re F	atent Application of)	MAIL STOP AMENDMENT						
Arie C	ornelis BESEMER et al.	Group Art Unit: 3761						
Applic	ation No.: 09/937,326	Examiner: Catharine L. ANDERSON						
Filing	Date: September 25, 2001	Confirmation No.: 9428						
Title:	HYGIENIC ABSORBENT WITH ODOUR CONTROL							
	AMENDMENT/REPLY TRANSMITTAL LETTER							
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
Sir:								
Enclosed is a reply for the above-identified patent application.								
	A Petition for Extension of Time is enclosed.							
	Terminal Disclaimer(s) and the \$\inspec\$ \$70 \$\inspec\$ \$140 fee per Disclaimer due under 37 C.F.R. \§ 1.20(d) are enclosed.							
	Also enclosed is a:							
	Small entity status is hereby claimed.							
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$\Boxed{\Boxes}\$ \$ 405 \$\Boxed{\Boxes}\$ \$ 810 fee due under 37 C.F.R. § 1.17(e).							
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.							
	Applicant(s) previously submittedcontinued examination is requested.	on for which						
	Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.							
	A Request for Entry and Consideration of (1809/2809) is also enclosed.	Submission under 37 C.F.R. § 1.129(a)						

Amendment/Reply Transmittal Letter Application No. <u>09/937,326</u> Attorney's Docket No. <u>1019219-000013</u> Page 2

	No additional claim fee is required.
\boxtimes	An additional claim fee is required, and is calculated as shown below:

AMENDED CLAIMS							
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additio	nal Fee	
Total Claims	18	20	0	x \$ 52 (1202)	\$	0	
Independent Claims	5	5	0	x \$ 220 (1201)		0	
☐ If Amendment adds multiple dependent claims, add \$ 390 (1203)					\$	0	
Total Claim Amendment Fee					\$	0	
☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee						0	
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT						0	

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	Chargeto	Deposit Account No. 02-4800 for the fee due	∂ .		
	A check in the amount of	is enclosed for the fee due.			
	Charge to credit card for	r the fee due. Form PTO-2038 is attached.			
	37 C.F.R. §§ 1.16, 1.17 and	for is hereby authorized to charge any appropriate fees under §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and ny overpayment, to Deposit Account No. 02-4800. This paper is submitted e.			
		Respectfully submitted,			
		BUCHANAN INGERSOLL & ROONEY PC			
Date	April 22, 2009	By: Fang Liu, Ph.D. Registration No. 51283			